

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF NEW YORK

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Truline Construction Services, Inc.

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 81-1856118

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>1330 Avenue of the Americas</u> <u>Suite 23</u> <u>New York, NY 10019</u> Number, Street, City, State & ZIP Code	<u>5221 23rd Avenue S</u> <u>Gulfport, FL 33707</u> P.O. Box, Number, Street, City, State & ZIP Code
	<u>New York</u> County	<u>Location of principal assets, if different from principal place of business</u> Number, Street, City, State & ZIP Code

5. Debtor's website (URL) https://trulinecm.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: _____

Debtor **Truline Construction Services, Inc.**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

☒ Chapter 7

☐ Chapter 9

☐ Chapter 11. Check **all** that apply:

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☒ No.

☐ Yes.

If more than 2 cases, attach a separate list.

District

When

Case number

District

When

Case number

Debtor **Truline Construction Services, Inc.** Case number (if known) _____
Name

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor Relationship
District _____ When _____ Case number, if known _____

11. Why is the case filed in this district?
- Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?
- ☒ No
☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** (Check all that apply.)
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____
- Where is the property?** _____
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds
- Check one:
- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets
- | | | |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
|---|--|--|

Debtor	Truline Construction Services, Inc.	Case number (if known)
Name		
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

Debtor **Truline Construction Services, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **October 12, 2023**
MM / DD / YYYY

X /s/ Michael Goldberg
Signature of authorized representative of debtor

Title **President**

Michael Goldberg
Printed name

18. Signature of attorney

X /s/ Adrienne Woods, Esq.
Signature of attorney for debtor

Date **October 12, 2023**
MM / DD / YYYY

Adrienne Woods, Esq. 4356770
Printed name

Weinberg Zareh Malkin Price LLP
Firm name

45 Rockefeller Plaza, 20th Floor
New York, NY 10111

Number, Street, City, State & ZIP Code

Contact phone **212-899-5470**

Email address **awoods@wzmplaw.com**

4356770 NY

Bar number and State

Fill in this information to identify the case:

Debtor name Truline Construction Services, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an
amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 12, 2023

X /s/ Michael Goldberg

Signature of individual signing on behalf of debtor

Michael Goldberg

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Truline Construction Services, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 1,645,884.89
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 1,645,884.89

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 541,755.81
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 0.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 4,243,378.47
4. Total liabilities Lines 2 + 3a + 3b	\$ 4,785,134.28

Fill in this information to identify the case:

Debtor name Truline Construction Services, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (*Identify all*)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Chase Bank

Checking

2733

\$281,387.14

3.2. TD Bank

Checking

4822

\$1,215.44

4. **Other cash equivalents** (*Identify all*)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$282,602.58

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
- ☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
- ☒ Yes Fill in the information below.

11. **Accounts receivable**

Debtor **Truline Construction Services, Inc.** Case number (If known) _____
Name

11a. 90 days old or less: **237,437.70** - **0.00** = **\$237,437.70**
face amount doubtful or uncollectible accounts

11b. Over 90 days old: **1,150,807.50** - **39,052.89** = **\$1,111,754.61**
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$1,349,192.31

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
(5)Laptops, (1)Printer	\$0.00	Replacement	\$1,600.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$1,600.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No

Debtor Truline Construction Services, Inc. Case number (If known) _____
Name

☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☐ No. Go to Part 9.

☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) Bulldog(\$200), (2)Sawzall(\$200), Big Grinder(\$80), (2)Small Grinder(\$120), Compound Drill Mixer Gun(\$150), Wet Vac(\$100), Demo Stripping Bar(\$50), Floor Scraper(\$20), Shovel(\$25), Pick Axe(\$30), Mop & Pail(\$50), Broom(\$15), Chopping Gun(\$800), (4)Portable Heaters(\$4000), Cordless Drill/Impact Combo(\$125), (3)Laundry Baskets(\$1,200), (2)A-Frames(\$400), (3)24' Extension Ladder(\$975), (2)Gang Box(\$1,500), Baker with Rails(\$800), 16' Ladder(\$300), (3) 6' Ladder(\$600), Misc. Hand Tools(\$300), Low Speed High Torque Circular Saw(\$450)	\$12,490.00	Liquidation	\$12,490.00

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$12,490.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

☒ No

☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

☒ No. Go to Part 10.

☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

Debtor Truline Construction Services, Inc. Case number (If known) _____
Name

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor Truline Construction Services, Inc. Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$282,602.58	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$1,349,192.31	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$1,600.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$12,490.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$1,645,884.89	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$1,645,884.89

Fill in this information to identify the case:

Debtor name Truline Construction Services, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	SBA Disaster Loan Service Ctr Creditor's Name 2 North 20th Street Suite 320 Birmingham, AL 35203 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number 7900 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Blanket Describe the lien UCC Lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$500,000.00	\$0.00

2.2	TD Bank Creditor's Name PO Box 5600 Lewiston, ME 04243 Creditor's mailing address Creditor's email address, if known Date debt was incurred Opened 10/2017 Last 4 digits of account number 9001 Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien Blanket Describe the lien UCC Lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$41,755.81	\$0.00
-----	---	---	--------------------	---------------

Debtor **Truline Construction Services, Inc.**

Case number (if known)

Name

☒ No

☐ Contingent

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$541,755.81

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

Fill in this information to identify the case:

Debtor name Truline Construction Services, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address 303 Construction 230 So. 5th Avenue Mount Vernon, NY 10660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$82,470.00
3.2	Nonpriority creditor's name and mailing address 711 New York Painting & Decora 4008 22nd Street Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$58,629.00
3.3	Nonpriority creditor's name and mailing address ABCO PEERLESS SPRINKLER CORPOR 50 Midland Avenue Hicksville, NY 11801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$13,390.00
3.4	Nonpriority creditor's name and mailing address Accurate Door & Hardware 10 West End Road Totowa, NJ 07512 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$430.00

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.5	Nonpriority creditor's name and mailing address Alba Services 240 W 52nd Street New York, NY 10019 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,013.04 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
-----	---	---

3.6	Nonpriority creditor's name and mailing address All Seasons Movers 909 Newark Turnpike Kearny, NJ 07032 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,431.25 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
-----	--	---

3.7	Nonpriority creditor's name and mailing address Allforce Contracting Corp 53-02 11th Street Long Island City, NY 11101 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,372.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
-----	---	---

3.8	Nonpriority creditor's name and mailing address Amergy Electric of NY 65 Broadway Suite 1804 New York, NY 10006 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$76,861.46 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
-----	--	---

3.9	Nonpriority creditor's name and mailing address American Express PO Box 1270 Newark, NJ 07101 Date(s) debt was incurred _____ Last 4 digits of account number <u>2003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$79,627.41 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
-----	---	--

3.10	Nonpriority creditor's name and mailing address Anfield Interiors 261 W 35th Street Suite 705 New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$55,286.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.11	Nonpriority creditor's name and mailing address Atlas Acon Electric 283 Hudson Street New York, NY 10013 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$45,876.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.12	Nonpriority creditor's name and mailing address Avalon Electric Corporation 5760 Broadway 2nd Floor Bronx, NY 10463 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$162,961.09 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.13	Nonpriority creditor's name and mailing address BCompliant 1633 Broadway Fl 46 New York, NY 10019 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,100.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.14	Nonpriority creditor's name and mailing address Bedrock Plumbing & Heating 101-14 Jamaica Ave Richmond Hill, NY 11418 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,700.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.15	Nonpriority creditor's name and mailing address BH Drywall & Painting, Inc. 66-00 Queens Midtown Expresswa Suite 304 Maspeth, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$91,144.27 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.16	Nonpriority creditor's name and mailing address Biordi, Inc 43-20 102nd Street Corona, NY 11368 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$32,350.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.17	Nonpriority creditor's name and mailing address Burgess Steel 200 West Forest Avenue Englewood, NJ 07631 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,500.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.18	Nonpriority creditor's name and mailing address CCM Roofing LLC 105 Bloomingdale Road Hicksville, NY 11801 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$67,750.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

Debtor	Truline Construction Services, Inc.		Case number (if known)
	Name		

3.19	Nonpriority creditor's name and mailing address Concept Plumbing, Inc. 360 Ashburton Avenue Yonkers, NY 10701 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,451.39
3.20	Nonpriority creditor's name and mailing address Consolidated Specialty Surface 465 Meadow Lane Carlstadt, NJ 07072 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$82,809.05
3.21	Nonpriority creditor's name and mailing address Di Santi Mechancial 101 E Main Street Building 3 Little Falls, NJ 07424 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,250.00
3.22	Nonpriority creditor's name and mailing address Dicor Construction 15 Garfield Avenue Bay Shore, NY 11706 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,336.36
3.23	Nonpriority creditor's name and mailing address Donnelly Mechanical 96-59 222nd Street Queens Village, NY 11429 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$192,110.79
3.24	Nonpriority creditor's name and mailing address Dormakaba 41 Heisser Lane Farmingdale, NY 11735 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,839.46
3.25	Nonpriority creditor's name and mailing address Eden Construction 1670 Dutch Broadway Elmont, NY 11003 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,300.00

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.26	Nonpriority creditor's name and mailing address Energy Fencing 721 VAN SINDEREN AVE Brooklyn, NY 11207 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$45,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.27	Nonpriority creditor's name and mailing address Ess & Vee Acoustical Contracto 23-30 50th Avenue Long Island City, NY 11101 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,262.63 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.28	Nonpriority creditor's name and mailing address ETS Contracting Inc 160 Clay Street Brooklyn, NY 11222 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$15,716.80 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.29	Nonpriority creditor's name and mailing address Evro Group Corp 2175 Wantagh Avenue Suite 104 Wantagh, NY 11793 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$25,780.82 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.30	Nonpriority creditor's name and mailing address Facility Solutions Group 494 8th Avenue Suite 200 New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,210.28 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.31	Nonpriority creditor's name and mailing address First Insurance 450 Skokie Boulevard Suite 1000 Northbrook, IL 60062-7917 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$34,948.46 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.32	Nonpriority creditor's name and mailing address Foam Insulation Solution 4205 Avenue H Brooklyn, NY 11210 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,687.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.33	Nonpriority creditor's name and mailing address Fox Glass Company East 45 Bloomingdale Road Hicksville, NY 11801 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$437.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	Nonpriority creditor's name and mailing address General Building Appliance Cor 750 Stewart Avenue Garden City, NY 11530 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35	Nonpriority creditor's name and mailing address GMC Contracting Group 226 Miller Street Newark, NJ 07114 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$296,848.64 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	Nonpriority creditor's name and mailing address HandiLift, Inc 730 Garden Street Carlstadt, NJ 07072 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,506.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37	Nonpriority creditor's name and mailing address High Rise Fire and Security 144 21st Street Brooklyn, NY 11232 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,800.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Nonpriority creditor's name and mailing address Homecore Inc 207 Lawrence Avenue Inwood, NY 11096 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,950.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39	Nonpriority creditor's name and mailing address International Blind Contractor 274 Madison Avenue Suite 404 New York, NY 10016 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,125.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.40	Nonpriority creditor's name and mailing address iPlaster 812 Midland Road Oradell, NJ 07469 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,350.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.41	Nonpriority creditor's name and mailing address Island Painting Inc 262 W 38th Street 16th Floor New York, NY 10018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,796.80 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.42	Nonpriority creditor's name and mailing address Jasa Group 200 Vesey Street New York, NY 10281 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,700.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.43	Nonpriority creditor's name and mailing address John Russell Brockway 528 Downer Street Westfield, NJ 07090 Date(s) debt was incurred <u>Opened 3/1/2023</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$56,186.09 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.44	Nonpriority creditor's name and mailing address Joyce Interiors 220 Ferris Ave., Suite 105 White Plains, NY 10603 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30,711.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.45	Nonpriority creditor's name and mailing address JT Roselle 84 Business Park Drive Suite 106 Armonk, NY 10504 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$39,836.93 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.46	Nonpriority creditor's name and mailing address Kelair Inc 301 Fields Lane Suite 7 Brewster, NY 10509 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,956.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.47	Nonpriority creditor's name and mailing address Kilree Construction Inc 17 South MacQuesten Pkwy Mount Vernon, NY 10550 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$349,525.52 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.48	Nonpriority creditor's name and mailing address KJP Enterprises, Inc 200 Keen Street Paterson, NJ 07524 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.49	Nonpriority creditor's name and mailing address Liberty Contracting Corp 2531 94th Street North Bergen, NJ 07047 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$884.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.50	Nonpriority creditor's name and mailing address Lion Electric Inc 205 Route 46 West Suite 7B Totowa, NJ 07512 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,635.75 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.51	Nonpriority creditor's name and mailing address Luparello & Sons Lighting 144 Rome Street Farmingdale, NY 11735 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,727.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.52	Nonpriority creditor's name and mailing address M&T Plumbing 120 East 13th Street New York, NY 10003 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$90,748.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.53	Nonpriority creditor's name and mailing address M. J. Melo Painting, LTD 2015 Forest Avenue Suite C1 Staten Island, NY 10303 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$90,861.25 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.54	Nonpriority creditor's name and mailing address Maser Consulting 331 Newman Springs Rd Suite 203 Red Bank, NJ 07701 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,450.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.55	Nonpriority creditor's name and mailing address Mason Tenders #79 520 Eighth Avenue Suite 600 New York, NY 10018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$210,653.29 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.56	Nonpriority creditor's name and mailing address Maspeth Roofing 54-30 44th Street Maspeth, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$630.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.57	Nonpriority creditor's name and mailing address Matros Automated 5-33 50th Avenue Long Island City, NY 11101 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$44,225.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.58	Nonpriority creditor's name and mailing address Metro Glass Corp 161 Saw Mill River Rd Lot E Yonkers, NY 10701 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$21,700.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.59	Nonpriority creditor's name and mailing address Midre Contracting Corp 60-01 Northern Blvd. Woodside, NY 11377 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$204,544.80 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.60	Nonpriority creditor's name and mailing address MPS Mechanical, LLC 706 Route 15 South Suite 206 Lake Hopatcong, NJ 07849 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,078.01 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.61	Nonpriority creditor's name and mailing address MRDC Services Inc. 226 Miller Street Newark, NJ 07114 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$16,039.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62	Nonpriority creditor's name and mailing address Mt. Hawley 9025 N. Lindbergh Drive Peoria, IL 61615 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,650.28 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address New York Insulation Inc. 58-48 59th Street Maspeth, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,140.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address Nguyen Custom Woodworking, LLC 780 East 134th St. 5th Fl. Bronx, NY 10454 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$279,225.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	Nonpriority creditor's name and mailing address NJ Boom & Erectors 405 Industrial Park Drive Mount Pocono, PA 18344 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,633.22 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66	Nonpriority creditor's name and mailing address NYC Dept. of Finance Oath ECB Judgments PO Box 2307 New York, NY 10272 Date(s) debt was incurred <u>Opened 8/18/2022 Last Active 10/6/2022</u> Last 4 digits of account number <u>7346</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,655.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>OATH Violations</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	Nonpriority creditor's name and mailing address Obar Systems, Inc 2969 Route 23 Newfoundland, NJ 07435 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,200.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Truline Construction Services, Inc. <small>Name</small>	Case number (if known) _____
--------	---	------------------------------

3.68	Nonpriority creditor's name and mailing address Outsource Consulting 237 West 35th Street New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,507.06 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.69	Nonpriority creditor's name and mailing address PAL Environmental Safety Corp 1102 Queens Plaza South Long Island City, NY 11101 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,800.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.70	Nonpriority creditor's name and mailing address PAL Supply Corp. 200 Blydenburgh Road Unit 18 Islandia, NY 11749 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,052.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.71	Nonpriority creditor's name and mailing address PBM Painting, LLC 405 Lexington Avenue 40th Fl New York, NY 10174 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,880.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.72	Nonpriority creditor's name and mailing address Peter Hywel Plumbing & Heating 51 Woodland Road Ringwood, NJ 07546 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,242.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.73	Nonpriority creditor's name and mailing address Poured Floors 1552 Stevens Avenue Uniondale, NY 11506 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$19,465.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.74	Nonpriority creditor's name and mailing address Premier Wood Concepts Inc 277 Martine Avenue Suite 214 White Plains, NY 10601 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.75	Nonpriority creditor's name and mailing address QuietStar Industries 734 Grand Ave Unit C Ridgefield, NJ 07657 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,675.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.76	Nonpriority creditor's name and mailing address RD Weis LLC 350 Seventh Ave Suite 903 New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$39,257.22 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.77	Nonpriority creditor's name and mailing address S & S Roofing, Inc 2 Self Blvd Carteret, NJ 07008 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,103.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.78	Nonpriority creditor's name and mailing address Sadri Ymaj & Pranvery Ymaj c/o Michael B. Palillo, P.C. 277 Broadway, Suite 501 New York, NY 10007 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.79	Nonpriority creditor's name and mailing address Safety Building Cleaning Corp. 5 West 37th Street #803 New York, NY 10018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$14,863.75 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.80	Nonpriority creditor's name and mailing address Saimer Interiors, Inc 52-79 72nd Place Maspeth, NY 11378 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30,816.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.81	Nonpriority creditor's name and mailing address Schindler Elevator Corporation 105 Maxess Road Suite N120 Melville, NY 11747 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$40,646.32 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

Debtor	Truline Construction Services, Inc. Name _____	Case number (if known) _____
--------	--	------------------------------

3.82	Nonpriority creditor's name and mailing address SGI Metal & Glass LLC 7206 69th Street Suite C-1 Ridgewood, NY 11385 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$360,483.35 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.83	Nonpriority creditor's name and mailing address Soundtone Floors, Inc 43-02 37th Street Long Island City, NY 11101 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$230.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.84	Nonpriority creditor's name and mailing address Sovereign Mechanical Corp 307 Seventh Avenue New York, NY 10001 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.85	Nonpriority creditor's name and mailing address SportProsUSA 500 West Main Street Suite 19 Wyckoff, NJ 07841 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$35,779.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

3.86	Nonpriority creditor's name and mailing address Starr Industries LLC 379 Fifth Avenue 4th Floor New York, NY 10016 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$63,611.55 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.87	Nonpriority creditor's name and mailing address Steuer Enterprises 35 Commerce Drive Carmel, NY 10512 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,700.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.88	Nonpriority creditor's name and mailing address Superior Metal & Woodwork 70 Central Ave Farmingdale, NY 11735 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,020.00 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	--

Debtor	Truline Construction Services, Inc. <small>Name</small>	Case number (if known) _____
--------	---	------------------------------

3.89	Nonpriority creditor's name and mailing address The Metro Group 100 Leuning Street South Hackensack, NJ 07606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$119,570.96
------	--	--	---------------------

3.90	Nonpriority creditor's name and mailing address Thor Marble & Granite LLC 22 Lois Place Staten Island, NY 10301 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,700.00
------	--	--	-------------------

3.91	Nonpriority creditor's name and mailing address TJ Steel LLC 18 Amicalola Road Highland Lakes, NJ 07422 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
------	--	--	----------------

3.92	Nonpriority creditor's name and mailing address TOR Concrete LLC 37-16 Utopia Pkwy Flushing, NY 11358 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,935.00
------	--	--	-------------------

3.93	Nonpriority creditor's name and mailing address Tri State Marble POB 5068 Bergenfield, NJ 07621 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,900.00
------	--	---	--------------------

3.94	Nonpriority creditor's name and mailing address Truart Sign Co, Inc. 187 Main Street Freeport, NY 11520 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,766.00
------	--	---	-------------------

3.95	Nonpriority creditor's name and mailing address United Spray LLC 3 Contorino Way #1 Chester, NY 10918 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$570.00
------	--	--	-----------------

Debtor	Truline Construction Services, Inc. <small>Name</small>	Case number (if known) _____
--------	---	------------------------------

3.96	Nonpriority creditor's name and mailing address Unity Creations, Ltd. 3997 Route 9W PO Box 9 Saugerties, NY 12477 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.97	Nonpriority creditor's name and mailing address Unity Electric 65-45 Fresh Meadow Lane Fresh Meadows, NY 11365 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$209,250.00
3.98	Nonpriority creditor's name and mailing address Wenig 45 Ranick Drive East Suite B Amityville, NY 11701 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,057.40
3.99	Nonpriority creditor's name and mailing address Wesco Receivables Corp. Wesco Distribution, Inc. PO Box 641447 Pittsburgh, PA 15264-1447 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$490.48

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Frank, Goldstein & Nager 330 W, 38th Street Suite 701 New York, NY 10018	Line <u>3.79</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Gartner & Bloom, PC 801 Second Avenue 11th Floor New York, NY 10017	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	Law Offices of Edward Weissman 555 5th Avenue 14th Floor New York, NY 10017	Line <u>3.81</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

Debtor **Truline Construction Services, Inc.**
Name

Case number (if known)

5a. Total claims from Part 1

5a. \$ 0.00

5b. Total claims from Part 2

5b. + \$ 4,243,378.47

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$ 4,243,378.47

Fill in this information to identify the case:

Debtor name **Truline Construction Services, Inc.**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Contract for 533 West 57th Street Entrance Lobby Renovation**

State the term remaining

List the contract number of any government contract _____

**521-533 West 57th St. Condo
c/o Meringoff Properties, Inc.
30 West 26th St., 8th Floor
New York, NY 10010**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Contract for the project of Center for the Study of Childhood Development [CSCD] Milbank Hall, 604-606 W120th Street, New York, NY 10027**

State the term remaining

List the contract number of any government contract _____

**Barnard College
Attn: Eileen Di Benedetto, CFO
3009 Broadway
New York, NY 10027**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Contract for renovations for Democracy Prep Harlem High**

State the term remaining

List the contract number of any government contract _____

**Democracy Prep New York
Charter Schools
1767 Park Avenue, 5th Floor
New York, NY 10035**

Debtor 1 **Truline Construction Services, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.4. State what the contract or lease is for and the nature of the debtor's interest

**Contract dated
12/6/2021 for project
2017 FMTC 4BCC Store
Front Rep, 4 Chase
Matrotech Center,
Brooklyn, NY 11245**

State the term remaining

List the contract number of any government contract

**JPMorgan Chase Bank
4 Chase Metrotech Center
Brooklyn, NY 11245**

2.5. State what the contract or lease is for and the nature of the debtor's interest

**Contract for the project
Luria Academy, 664
Bergen Street,
Brooklyn, NY 11238**

State the term remaining

List the contract number of any government contract

**Luria Academy of Brooklyn
238 St. Marks Avenue
Brooklyn, NY 11238**

2.6. State what the contract or lease is for and the nature of the debtor's interest

**Contract for project
Sirius XM Radio -
Content Caputure
Room, 1221 Avenue of
the Americas, New
York, NY 10020**

State the term remaining

List the contract number of any government contract

**Sirius XM Radio
1221 Avenue of the Americas
New York, NY 10020**

2.7. State what the contract or lease is for and the nature of the debtor's interest

**Contract for St.
Cecilia's Church -
Boiler Replacement**

State the term remaining

List the contract number of any government contract

**St. Cecilia's Church
120 East 106 Street
New York, NY 10029**

2.8. State what the contract or lease is for and the nature of the debtor's interest

**Contract for project of
St. Cecilia's Church -
Inclined Wheelchair
Lift, Sidewalk
Replacement and Vault
Repairs**

State the term remaining

List the contract number of any government contract

**St. Cecilia's Church
120 East 106 Street
New York, NY 10029**

Fill in this information to identify the case:

Debtor name Truline Construction Services, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

- | | | | | |
|-------|---------------------------------------|--|---|---|
| 2.1 | Benchmark Builders, Inc. | 27 Parkview Court
White Plains, NY 10603 | Sadri Ymaj &
Pranvery Ymaj c/o | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.78</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.2 | Denver Properties, LLC | 10 Bank Street
Suite 560
White Plains, NY 10603 | Sadri Ymaj &
Pranvery Ymaj c/o | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.78</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.3 | Empire State Realey Trust, Inc | 80 State Street
Albany, NY 12207 | Sadri Ymaj &
Pranvery Ymaj c/o | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.78</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.4 | Jones Lang La Salle, Inc. | 60 N. Prospect Avenue
Lynbrook, NY 11563 | Sadri Ymaj &
Pranvery Ymaj c/o | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.78</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.5 | Par Fire Protection, LLC | 60 N. Prospect Avneue
Lynbrook, NY 11563 | Sadri Ymaj &
Pranvery Ymaj c/o | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.78</u>
<input type="checkbox"/> G _____ |

Debtor Truline Construction Services, Inc. Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Par Plumbing Co., Inc.	60 N. Prospect Avenue Lynbrook, NY 11563	Sadri Ymaj & Pranvery Ymaj c/o	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.78</u> <input type="checkbox"/> G _____
-----	-------------------------------	---	---	---

2.7	Quest Builders Group, Inc.	242 West 30th Street 5th Floor New York, NY 10001	Sadri Ymaj & Pranvery Ymaj c/o	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.78</u> <input type="checkbox"/> G _____
-----	-----------------------------------	--	---	---

2.8	SL Green Realty Corp.	28 Liberty Street New York, NY 10005	Sadri Ymaj & Pranvery Ymaj c/o	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.78</u> <input type="checkbox"/> G _____
-----	------------------------------	---	---	---

Fill in this information to identify the case:

Debtor name Truline Construction Services, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2023 to Filing Date

☒ Operating a business
☐ Other _____

\$3,296,678.63

For prior year:
From 1/01/2022 to 12/31/2022

☒ Operating a business
☐ Other _____

\$10,642,538.00

For year before that:
From 1/01/2021 to 12/31/2021

☒ Operating a business
☐ Other _____

\$8,244,415.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

Debtor **Truline Construction Services, Inc.**

Case number (if known) _____

or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Sadri Ymaj & Pranvera Ymaj -vs- Empire State Realty, Truline Construction, et al 150108/2022	Civil Suit	Supreme Court of the State of New York County of New York	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☐ None

Debtor **Truline Construction Services, Inc.**

Case number (if known)

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	Charity Clay Shoot 4-06A Bell Boulevard Suite 455 Bayside, NY 11361	Paid for a round of sporting clays	4/5/2022	\$2,800.00
	Recipients relationship to debtor Business Networking			
9.2.	Friends of the Vietnam Plaza PO Box 944 Peck Slip Station New York, NY 10272-0944	Tickets for Luncheon	10/12/2021	\$1,000.00
	Recipients relationship to debtor Business Networking			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost

Part 6: Certain Payments or Transfers

11. **Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Weinberg Zareh Malkin Price LLP 45 Rockefeller Plaza, 20th Floor New York, NY 10111	Attorney Fees	6/8/2023	\$20,000.00
	Email or website address awoods@wzmplaw.com			
	Who made the payment, if not debtor?			

12. **Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

Debtor **Truline Construction Services, Inc.**

Case number (if known) _____

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	---	---------------------------	--------------------------

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. 255 E. 49th Street 28E New York, NY 10017	11/2021

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	---	---

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
☒ Yes. Does the debtor serve as plan administrator?

☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

Truline Contruction

Employer identification number of the plan

EIN: **81-1856118**

Has the plan been terminated?

☒ No

Debtor **Truline Construction Services, Inc.**

Case number (if known) _____

☐ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. TD Bank	XXXX-2660	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	6/2023	\$0.00
18.2. TD Bank	XXXX-4526	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	6/2/2022	\$0.00
18.3. TD Bank	XXXX-4759	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	2/28/2022	\$2,325.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
---	--	-----------------------------	----------------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Storage Post 32 Grand Avenue Unit BSC115 Brooklyn, NY 11205	Pete Woessner, Paul Palasciano, Kevin Buttgieg, John Russel Brockway, Michael Goldberg	Gangboxes, Tools, Construction Materials	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

Debtor **Truline Construction Services, Inc.**

Case number (if known)

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
-----------------------	-------------------------------------	--	------------------------

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
------------------	----------------------------

Debtor **Truline Construction Services, Inc.**

Case number (if known)

Name and address	Date of service From-To
26a.1. Melissa Raulston 5221 23rd Avenue S Gulfport, FL 33707	2016 - 2023

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26b.1. Zapkin & Loeb 3 Crossways Park Drive West Woodbury, NY 11797	2020 - 2023

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Melissa Raulston 5221 23rd Avenue S Gulfport, FL 33707	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. New York State Insurance Fund Attn: Dharmest Patel, Senior Auditor PO Box 66699 Albany, NY 12206
26d.2. SML Capital Advisors Attn: Jeffrey Romanowsky 471 N. Broadway Siote 293 Jericho, NY 11753
26d.3. Alliant Insurance Services, Inc. PO Box 21728 New York, NY 10087-4728

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
--	-------------------	---

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Debtor **Truline Construction Services, Inc.**

Case number (if known) _____

Name	Address	Position and nature of any interest	% of interest, if any
Melissa Raulston	5221 23rd Avenue S Gulfport, FL 33707	CFO	51%

Name	Address	Position and nature of any interest	% of interest, if any
Michael Goldberg	5221 23rd Avenue S Gulfport, FL 33707	President	49%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Michael Goldberg 5221 23rd Avenue S Gulfport, FL 33707	\$85,399.01	7/14/2022 - 7/20/2023	Salary
	Relationship to debtor President			
30.2	Melissa Raulston 5221 23rd Avenue S Gulfport, FL 33707	\$88,680.32	7/7/2022 - 7/20/2023	Salary
	Relationship to debtor Chief Financial Officer			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
Mason Tenders Local #79	EIN: 13-6190433

Debtor Truline Construction Services, Inc.

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 12, 2023

/s/ Michael Goldberg

Signature of individual signing on behalf of the debtor

Michael Goldberg

Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
Southern District of New York**

In re **Truline Construction Services, Inc.**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	20,000.00
Prior to the filing of this statement I have received	\$	20,000.00
Balance Due	\$	0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 12, 2023

Date

/s/ Adrienne Woods, Esq.

Adrienne Woods, Esq. 4356770

Signature of Attorney

Weinberg Zareh Malkin Price LLP

45 Rockefeller Plaza, 20th Floor

New York, NY 10111

212-899-5470

awoods@wzmplaw.com

Name of law firm

**United States Bankruptcy Court
Southern District of New York**

In re **Truline Construction Services, Inc.**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **October 12, 2023**

/s/ Michael Goldberg

Michael Goldberg/President

Signer/Title

303 CONSTRUCTION
230 SO. 5TH AVENUE
MOUNT VERNON, NY 10660

521-533 WEST 57TH ST. CONDO
C/O MERINGOFF PROPERTIES, INC.
30 WEST 26TH ST., 8TH FLOOR
NEW YORK, NY 10010

711 NEW YORK PAINTING & DECORA
4008 22ND STREET
LONG ISLAND CITY, NY 11101

ABCO PEERLESS SPRINKLER CORPOR
50 MIDLAND AVENUE
HICKSVILLE, NY 11801

ACCURATE DOOR & HARDWARE
10 WEST END ROAD
TOTOWA, NJ 07512

ALBA SERVICES
240 W 52ND STREET
NEW YORK, NY 10019

ALL SEASONS MOVERS
909 NEWARK TURNPIKE
KEARNY, NJ 07032

ALLFORCE CONTRACTING CORP
53-02 11TH STREET
LONG ISLAND CITY, NY 11101

AMERGY ELECTRIC OF NY
65 BROADWAY
SUITE 1804
NEW YORK, NY 10006

AMERICAN EXPRESS
PO BOX 1270
NEWARK, NJ 07101

ANFIELD INTERIORS
261 W 35TH STREET
SUITE 705
NEW YORK, NY 10001

ATLAS ACON ELECTRIC
283 HUDSON STREET
NEW YORK, NY 10013

AVALON ELECTRIC CORPORATION
5760 BROADWAY
2ND FLOOR
BRONX, NY 10463

BARNARD COLLEGE
ATTN: EILEEN DI BENEDETTO, CFO
3009 BROADWAY
NEW YORK, NY 10027

BCOMPLIANT
1633 BROADWAY
FL 46
NEW YORK, NY 10019

BEDROCK PLUMBING & HEATING
101-14 JAMAICA AVE
RICHMOND HILL, NY 11418

BENCHMARK BUILDERS, INC.
27 PARKVIEW COURT
WHITE PLAINS, NY 10603

BH DRYWALL & PAINTING, INC.
66-00 QUEENS MIDTOWN EXPRESSWA
SUITE 304
MASPETH, NY 11378

BIORDI, INC
43-20 102ND STREET
CORONA, NY 11368

BURGESS STEEL
200 WEST FOREST AVENUE
ENGLEWOOD, NJ 07631

CCM ROOFING LLC
105 BLOOMINGDALE ROAD
HICKSVILLE, NY 11801

COACTION SPECIALTY
412 MOUNT KEMBLE AVENUE
SUITE 300C
MORRISTOWN, NJ 07960

CONCEPT PLUMBING, INC.
360 ASHBURTON AVENUE
YONKERS, NY 10701

CONSOLIDATED SPECIALTY SURFACE
465 MEADOW LANE
CARLSTADT, NJ 07072

DAVIDOFF HUTCHER & CITRON, LLP
605 THIRD AVENUE
NEW YORK, NY 10156

DEMOCRACY PREP NEW YORK
CHARTER SCHOOLS
1767 PARK AVENUE, 5TH FLOOR
NEW YORK, NY 10035

DENVER PROPERTIES, LLC
10 BANK STREET
SUITE 560
WHITE PLAINS, NY 10603

DI SANTI MECHANICAL
101 E MAIN STREET
BUILDING 3
LITTLE FALLS, NJ 07424

DICOR CONSTRUCTION
15 GARFIELD AVENUE
BAY SHORE, NY 11706

DONNELLY MECHANICAL
96-59 222ND STREET
QUEENS VILLAGE, NY 11429

DORMAKABA
41 HEISSER LANE
FARMINGDALE, NY 11735

EDEN CONSTRUCTION
1670 DUTCH BROADWAY
ELMONT, NY 11003

EMPIRE STATE REALEY TRUST, INC
80 STATE STREET
ALBANY, NY 12207

ENERGY FENCING
721 VAN SINDEREN AVE
BROOKLYN, NY 11207

ESS & VEE ACOUSTICAL CONTRACTO
23-30 50TH AVENUE
LONG ISLAND CITY, NY 11101

ETS CONTRACTING INC
160 CLAY STREET
BROOKLYN, NY 11222

EVRO GROUP CORP
2175 WANTAGH AVENUE
SUITE 104
WANTAGH, NY 11793

FACILITY SOLUTIONS GROUP
494 8TH AVENUE
SUITE 200
NEW YORK, NY 10001

FIRST INSURANCE
450 SKOKIE BOULEVARD
SUITE 1000
NORTHBROOK, IL 60062-7917

FOAM INSULATION SOLUTION
4205 AVENUE H
BROOKLYN, NY 11210

FOX GLASS COMPANY EAST
45 BLOOMINGDALE ROAD
HICKSVILLE, NY 11801

FRANK, GOLDSTEIN & NAGER
330 W, 38TH STREET
SUITE 701
NEW YORK, NY 10018

GARTNER & BLOOM, PC
801 SECOND AVENUE
11TH FLOOR
NEW YORK, NY 10017

GENERAL BUILDING APPLIANCE COR
750 STEWART AVENUE
GARDEN CITY, NY 11530

GMC CONTRACTING GROUP
226 MILLER STREET
NEWARK, NJ 07114

HANDILIFT, INC
730 GARDEN STREET
CARLSTADT, NJ 07072

HIGH RISE FIRE AND SECURITY
144 21ST STREET
BROOKLYN, NY 11232

HEMOCORE INC
207 LAWRENCE AVENUE
INWOOD, NY 11096

INTERNATIONAL BLIND CONTRACTOR
274 MADISON AVENUE
SUITE 404
NEW YORK, NY 10016

IPLASTER
812 MIDLAND ROAD
ORADELL, NJ 07469

ISLAND PAINTING INC
262 W 38TH STREET
16TH FLOOR
NEW YORK, NY 10018

JASA GROUP
200 VESEY STREET
NEW YORK, NY 10281

JOHN RUSSELL BROCKWAY
528 DOWNER STREET
WESTFIELD, NJ 07090

JONES LANG LA SALLE, INC.
60 N. PROSPECT AVENUE
LYNBROOK, NY 11563

JOYCE INTERIORS
220 FERRIS AVE., SUITE 105
WHITE PLAINS, NY 10603

JPMORGAN CHASE BANK
4 CHASE METROTECH CENTER
BROOKLYN, NY 11245

JT ROSELLE
84 BUSINESS PARK DRIVE
SUITE 106
ARMONK, NY 10504

KELAIR INC
301 FIELDS LANE
SUITE 7
BREWSTER, NY 10509

KILREE CONSTRUCTION INC
17 SOUTH MACQUESTEN PKWY
MOUNT VERNON, NY 10550

KJP ENTERPRISES, INC
200 KEEN STREET
PATERSON, NJ 07524

LAW OFFICES OF EDWARD WEISSMAN
555 5TH AVENUE
14TH FLOOR
NEW YORK, NY 10017

LIBERTY CONTRACTING CORP
2531 94TH STREET
NORTH BERGEN, NJ 07047

LION ELECTRIC INC
205 ROUTE 46 WEST
SUITE 7B
TOTOWA, NJ 07512

LUPARELLO & SONS LIGHTING
144 ROME STREET
FARMINGDALE, NY 11735

LURIA ACADEMY OF BROOKLYN
238 ST. MARKS AVENUE
BROOKLYN, NY 11238

M&T PLUMBING
120 EAST 13TH STREET
NEW YORK, NY 10003

M. J. MELO PAINTING, LTD
2015 FOREST AVENUE
SUITE C1
STATEN ISLAND, NY 10303

MASER CONSULTING
331 NEWMAN SPRINGS RD
SUITE 203
RED BANK, NJ 07701

MASON TENDERS #79
520 EIGHTH AVENUE
SUITE 600
NEW YORK, NY 10018

MASPETH ROOFING
54-30 44TH STREET
MASPETH, NY 11378

MATROS AUTOMATED
5-33 50TH AVENUE
LONG ISLAND CITY, NY 11101

METRO GLASS CORP
161 SAW MILL RIVER RD
LOT E
YONKERS, NY 10701

MIDRE CONTRACTING CORP
60-01 NORTHERN BLVD.
WOODSIDE, NY 11377

MPS MECHANICAL, LLC
706 ROUTE 15 SOUTH
SUITE 206
LAKE HOPATCONG, NJ 07849

MRDC SERVICES INC.
226 MILLER STREET
NEWARK, NJ 07114

MT. HAWLEY
9025 N. LINDBERGH DRIVE
PEORIA, IL 61615

NEW YORK INSULATION INC.
58-48 59TH STREET
MASPETH, NY 11378

NGUYEN CUSTOM WOODWORKING, LLC
780 EAST 134TH ST. 5TH FL.
BRONX, NY 10454

NJ BOOM & ERECTORS
405 INDUSTRIAL PARK DRIVE
MOUNT POCONO, PA 18344

NYC DEPT. OF FINANCE
OATH ECB JUDGMENTS
PO BOX 2307
NEW YORK, NY 10272

O'TOOL SCRIVO
535 5TH AVENUE
4TH FLOOR
NEW YORK, NY 10017

OBAR SYSTEMS, INC
2969 ROUTE 23
NEWFOUNDLAND, NJ 07435

OUTSOURCE CONSULTING
237 WEST 35TH STREET
NEW YORK, NY 10001

PAL ENVIRONMENTAL SAFETY CORP
1102 QUEENS PLAZA SOUTH
LONG ISLAND CITY, NY 11101

PAL SUPPLY CORP.
200 BLYDENBURGH ROAD
UNIT 18
ISLANDIA, NY 11749

PALILLOW LAW
277 BROADWAY
SUITE 501
NEW YORK, NY 10007

PAR FIRE PROTECTION, LLC
60 N. PROSPECT AVNEUE
LYNBROOK, NY 11563

PAR PLUMBING CO., INC.
60 N. PROSPECT AVENUE
LYNBROOK, NY 11563

PBM PAINTING, LLC
405 LEXINGTON AVENUE
40TH FL
NEW YORK, NY 10174

PETER HYWEL PLUMBING & HEATING
51 WOODLAND ROAD
RINGWOOD, NJ 07546

POURED FLOORS
1552 STEVENS AVENUE
UNIONDALE, NY 11506

PREMIER WOOD CONCEPTS INC
277 MARTINE AVENUE
SUITE 214
WHITE PLAINS, NY 10601

QUEST BUILDERS GROUP, INC.
242 WEST 30TH STREET
5TH FLOOR
NEW YORK, NY 10001

QUIETSTAR INDUSTRIES
734 GRAND AVE
UNIT C
RIDGEFIELD, NJ 07657

RD WEIS LLC
350 SEVENTH AVE
SUITE 903
NEW YORK, NY 10001

ROCKVILLE RISK MANAGEMENT
119 NORTH PARK AVENUE
4TH FLOOR
ROCKVILLE CENTRE, NY 11570

S & S ROOFING, INC
2 SELF BLVD
CARTERET, NJ 07008

SADRI YMAJ & PRANVERY YMAJ C/O
MICHAEL B. PALILLO, P.C.
277 BROADWAY, SUITE 501
NEW YORK, NY 10007

SAFETY BUILDING CLEANING CORP.
5 WEST 37TH STREET
#803
NEW YORK, NY 10018

SAIMER INTERIORS, INC
52-79 72ND PLACE
MASPETH, NY 11378

SBA DISASTER LOAN SERVICE CTR
2 NORTH 20TH STREET
SUITE 320
BIRMINGHAM, AL 35203

SCHINDLER ELEVATOR CORPORATION
105 MAXESS ROAD
SUITE N120
MELVILLE, NY 11747

SGI METAL & GLASS LLC
7206 69TH STREET
SUITE C-1
RIDGEWOOD, NY 11385

SIRIUS XM RADIO
1221 AVENUE OF THE AMERICAS
NEW YORK, NY 10020

SL GREEN REALTY CORP.
28 LIBERTY STREET
NEW YORK, NY 10005

SOUNDTONE FLOORS, INC
43-02 37TH STREET
LONG ISLAND CITY, NY 11101

SOVEREIGN MECHANICAL CORP
307 SEVENTH AVENUE
NEW YORK, NY 10001

SPORTPROSUSA
500 WEST MAIN STREET
SUITE 19
WYCKOFF, NJ 07841

ST. CECILIA'S CHURCH
120 EAST 106 STREET
NEW YORK, NY 10029

STARR INDUSTRIES LLC
379 FIFTH AVENUE
4TH FLOOR
NEW YORK, NY 10016

STEVEER ENTERPRISES
35 COMMERCE DRIVE
CARMEL, NY 10512

SUPERIOR METAL & WOODWORK
70 CENTRAL AVE
FARMINGDALE, NY 11735

TD BANK
PO BOX 5600
LEWISTON, ME 04243

THE METRO GROUP
100 LEUNING STREET
SOUTH HACKENSACK, NJ 07606

THOR MARBLE & GRANITE LLC
22 LOIS PLACE
STATEN ISLAND, NY 10301

TJ STEEL LLC
18 AMICALOLA ROAD
HIGHLAND LAKES, NJ 07422

TOR CONCRETE LLC
37-16 UTOPIA PKWY
FLUSHING, NY 11358

TRI STATE MARBLE
POB 5068
BERGENFIELD, NJ 07621

TRUART SIGN CO, INC.
187 MAIN STREET
FREEPORT, NY 11520

UNITED SPRAY LLC
3 CONTORINO WAY #1
CHESTER, NY 10918

UNITY CREATIONS, LTD.
3997 ROUTE 9W
PO BOX 9
SAUGERTIES, NY 12477

UNITY ELECTRIC
65-45 FRESH MEADOW LANE
FRESH MEADOWS, NY 11365

WENIG
45 RANICK DRIVE EAST
SUITE B
AMITYVILLE, NY 11701

WESCO RECEIVABLES CORP.
WESCO DISTRIBUTION, INC.
PO BOX 641447
PITTSBURGH, PA 15264-1447

**United States Bankruptcy Court
Southern District of New York**

In re **Truline Construction Services, Inc.**

Debtor(s)

Case No.

Chapter

7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Truline Construction Services, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

October 12, 2023

Date

/s/ Adrienne Woods, Esq.

Adrienne Woods, Esq. 4356770

Signature of Attorney or Litigant

Counsel for **Truline Construction Services, Inc.**

Weinberg Zareh Malkin Price LLP

45 Rockefeller Plaza, 20th Floor

New York, NY 10111

212-899-5470

awoods@wzmplaw.com